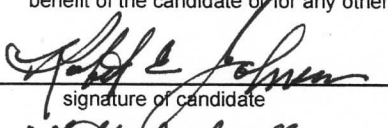
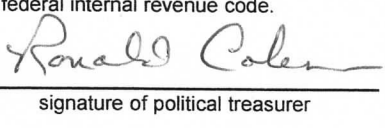
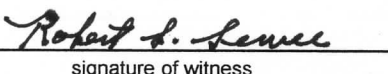
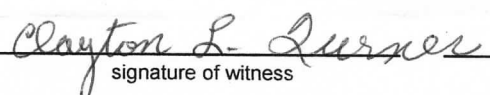


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 10-20-10		2.a. NAME OF CANDIDATE OR COMMITTEE Robert Bob Johnson													
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE NOV 2-2010													
4.a. CAMPAIGN ADDRESS AND PHONE <div style="display: flex; justify-content: space-between;"> Street or Rural Route City State Zip Code Phone </div> 3138 Seminole Crest Ln Chatt. TN 37462 423-622-9555															
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) <div style="display: flex; justify-content: space-between;"> Street or Rural Route City State Zip Code Phone </div>															
5. OFFICE SOUGHT (include district number, if applicable) Mayor East Ridge TN		6. NAME OF POLITICAL TREASURER (may be candidate) Ronald Coleman													
7. CATEGORY OR REPORT (Check one) <div style="display: flex; justify-content: space-between; font-size: small;"> <div> <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER </div> <div> <input type="checkbox"/> PRE-PRIMARY <input checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL </div> </div>															
8.a. BEGINNING DATE OF REPORTING PERIOD 9-12-10		8.b. ENDING DATE OF REPORTING PERIOD 10-20-10													
9. (Check one) a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. <input type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.															
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">  signature of candidate </div> <div style="text-align: center;"> 10-21-10 date </div> <div style="text-align: center;">  signature of political treasurer </div> <div style="text-align: center;"> 10-21-10 date </div> </div>															
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">  signature of witness </div> <div style="text-align: center;"> 10-21-10 date </div> <div style="text-align: center;">  signature of witness </div> <div style="text-align: center;"> 10-21-10 date </div> </div>															
12. SUMMARY <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">a. BALANCE ON HAND LAST REPORT</td> <td style="text-align: right;">\$ <u>0</u></td> </tr> <tr> <td>b. TOTAL RECEIPTS THIS PERIOD</td> <td style="text-align: right;">\$ <u>2,220</u></td> </tr> <tr> <td>c. TOTAL DISBURSEMENTS THIS PERIOD</td> <td style="text-align: right;">\$ <u>2,085.77</u></td> </tr> <tr> <td>d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)</td> <td style="text-align: right;">\$ <u>211.23</u></td> </tr> <tr> <td>e. TOTAL LOANS OUTSTANDING</td> <td style="text-align: right;">\$ <u>0</u></td> </tr> <tr> <td>f. TOTAL OBLIGATIONS OUTSTANDING</td> <td style="text-align: right;">\$ <u>0</u></td> </tr> </table>				a. BALANCE ON HAND LAST REPORT	\$ <u>0</u>	b. TOTAL RECEIPTS THIS PERIOD	\$ <u>2,220</u>	c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>2,085.77</u>	d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>211.23</u>	e. TOTAL LOANS OUTSTANDING	\$ <u>0</u>	f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>
a. BALANCE ON HAND LAST REPORT	\$ <u>0</u>														
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>2,220</u>														
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>2,085.77</u>														
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>211.23</u>														
e. TOTAL LOANS OUTSTANDING	\$ <u>0</u>														
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>														



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="font-family: cursive; font-size: 1.2em; margin-top: 5px;">Robert Johnson</div>	14. REPORT COVERING THE PERIOD FROM: <u>9-12-10</u> TO: <u>10-20-10</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$

b. Itemized Contributions (over \$100 from each source this period) \$

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$

16. LOANS RECEIVED THIS REPORTING PERIOD \$

17. INTEREST RECEIVED THIS REPORTING PERIOD \$

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

Signs	\$	1,235.17
Cards	\$	55.00
Advertising - Paper	\$	6.00 ⁰⁰
Food, Drinks, Supplies	\$	118.52
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Total of Expenditures (\$100 or less each payee) \$ 2,008.77

b. Itemized Expenditures (Over \$100 each payee this period) \$

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 0

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 2,008.77

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$

b. Itemized in-kind contributions (over \$100 from each source this period) \$

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$

b. Itemized Obligations Outstanding (Over \$100 each) \$

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ROBERT BOB Johnson		2. REPORT COVERING THE PERIOD FROM: 9-12-10 TO: 10-20-10	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 1,408.77
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name SAT Signs		Middle Name	Purpose of Expenditure Signs.
Last Name/Business Name			Amount of Expenditure \$ 240.00
Address 5729 Ringold Rd			
City East Ridge	State TN	Zip Code 37412	
First Name DIVERSIFIED Sign Supplies		Middle Name	Purpose of Expenditure BANNER'S
Last Name/Business Name			Amount of Expenditure 86.40 Tax 800 894.40
Address 1700 Dollys Ave.			
City Chatt TN.	State TN	Zip Code 37404	
First Name B.L.C.		Middle Name	Purpose of Expenditure CARDS
Last Name/Business Name PRINTING SERVICES			Amount of Expenditure 55.00
Address P.O. Box 9735			
City Chatt.	State TN	Zip Code 37412	
First Name TARGETS		Middle Name	Purpose of Expenditure DRINKS
Last Name/Business Name			Amount of Expenditure 64.66
Address 1816 GUNBARRELL Rd			
City Chatt	State TN	Zip Code 37421	
First Name SAM'S		Middle Name	Purpose of Expenditure SUPPLIES FOR RALLY.
Last Name/Business Name Club.			Amount of Expenditure 53.40
Address 2512 LEB Hwy			
City Phatt	State TN	Zip Code 37421	
First Name Sign. A Rama.		Middle Name	Purpose of Expenditure YARD SIGNS.
Last Name/Business Name			Amount of Expenditure 901.31
Address 5345 Ringold Rd.			
City East Ridge	State TN	Zip Code 37412	
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>ROBERT JOHNSON</i>			2. REPORT COVERING THE PERIOD FROM <i>9-12-10</i> TO: <i>10-20-10</i>		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>518.46</i>		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name <i>CHATT TIMES</i>		Middle Name		Purpose of Expenditure <i>ADVERTISING</i>	Amount of Expenditure <i>600.00</i>
Last Name/Business Name <i>FREE PRESS</i>					
Address <i>400 E. 11th ST.</i>					
City <i>CHATT</i>	State <i>TN</i>	Zip Code <i>37403</i>			
First Name <i>WALMART</i>		Middle Name		Purpose of Expenditure <i>SUPPLIES & FOOD FOR RALLY.</i>	Amount of Expenditure <i>118.46</i>
Last Name/Business Name					
Address <i>5764 LEX. HWY</i>					
City <i>PLATT</i>	State <i>TN</i>	Zip Code <i>37421</i>			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Robert Johnson		2. REPORT COVERING THE PERIOD FROM: 9-12-10 TO: 10-20-10	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 1,200
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name Lynn	Middle Name J	Contribution Received For:	
Last Name/Organization Name Gibson		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 430 Pine Bluff Dr.		<input type="checkbox"/> Runoff (Local Elections Only)	
City East Ridge	State TN	Zip Code 37412	Date of Contribution 9-12-10
Occupation IVESTOR	Employer SELF		Amount of Contribution \$100.00
			Aggregate This Election
First Name Denny	Middle Name	Contribution Received For:	
Last Name/Organization Name Manning		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 930 Sunnyvale Cir.		<input type="checkbox"/> Runoff (Local Elections Only)	
City East Ridge	State TN	Zip Code 37412	Date of Contribution 9-11-10
Occupation PREACHER	Employer		Amount of Contribution 100.00
			Aggregate This Election
First Name Tom	Middle Name	Contribution Received For:	
Last Name/Organization Name CRATON		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1513 Heritage Landing Dr.		<input type="checkbox"/> Runoff (Local Elections Only)	
City Chatt	State TN	Zip Code 37405	Date of Contribution 9-16-10
Occupation RETIRED	Employer		Amount of Contribution \$500.00
			Aggregate This Election
First Name Ronald	Middle Name	Contribution Received For:	
Last Name/Organization Name COLEMAN		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1503 Heritage Landing Dr.		<input type="checkbox"/> Runoff (Local Elections Only)	
City Chatt.	State TN	Zip Code 37405	Date of Contribution 9-16-10
Occupation RETIRED	Employer		Amount of Contribution 500.00
			Aggregate This Election
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)			



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>ROBERT JOHNSON</i>				2. REPORT COVERING THE PERIOD FROM: <i>9-12-10</i> TO: <i>10-20-10</i>		
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>1,200</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)						
First Name <i>DESS</i>		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Value of In-Kind Contribution <i>500.00</i>
Last Name/Organization Name <i>INGRAM</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
Address <i>251 LYRLEY ST.</i>				Date of In-Kind Contribution <i>10-3-10</i>		Aggregate this Election
City <i>CHATT TN</i>		State <i>TN</i>		Zip Code <i>37404</i>		Description of In-Kind Contribution
Occupation <i>Physician</i>		Employer <i>SELF</i>				
First Name <i>ALAN</i>		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Value of In-Kind Contribution <i>500.00</i>
Last Name/Organization Name <i>HUGHES</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
Address <i>1720 GUNBARREI RD</i>				Date of In-Kind Contribution <i>10-3-10</i>		Aggregate this Election
City <i>CHATT</i>		State <i>TN</i>		Zip Code <i>37421</i>		Description of In-Kind Contribution
Occupation <i>Physician</i>		Employer <i>SELF</i>				
First Name <i>John</i>		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Value of In-Kind Contribution <i>20.00</i>
Last Name/Organization Name <i>FUGATE</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
Address <i>431 Glenhill Rd.</i>				Date of In-Kind Contribution <i>10-16-10</i>		Aggregate this Election
City <i>Red Bank</i>		State <i>TN</i>		Zip Code <i>37421</i>		Description of In-Kind Contribution
Occupation <i>Retired</i>		Employer				
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State		Zip Code		Description of In-Kind Contribution
Occupation		Employer				
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)						

